


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

FORM C/OH  
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000000		2 Total pages this report: 1/14	
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Mr. Enrique NICKNAME LAST SUFFIX Barrera				<b>OFFICE USE ONLY</b> Date Received  Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 761555 San Antonio TX 78245 <input type="checkbox"/> Change of Address				
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Mrs. Leticia NICKNAME LAST SUFFIX Barrera				Receipt # Amount Date Processed Date Imaged
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6435 Buena Vista San Antonio TX 78237				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 432-2431				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/0003 03/26/0003				
10 ELECTION	ELECTION DATE Month Day Year 05/03/0003		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Other -- City Council 6		12 OFFICE SOUGHT (if known) Other -- City Council 6		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...				
	Name				
	Address/PO Box; Apt. / Suite #; City; State; Zip Code				
<input type="checkbox"/> additional pages					

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

2003 APR -3 P 1:43

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

## COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 NO REPORTABLE  
ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 3520.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

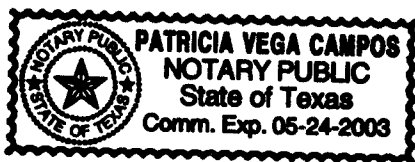
4. TOTAL POLITICAL EXPENDITURES

\$ 14977.93

OUTSTANDING  
LOAN TOTALS5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

## 19 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*[Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Enrique Barrera, this the 3rd day of April, 2003, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE A 1**

(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3 P 1143  
Total pages this report:

<b>2 FILER NAME</b> Mr. Enrique Barrera		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00000000	
<b>4 Date</b> 03/19/0003	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mrs. Carolyn Custer  <b>6 Contributor address; City; State; Zip Code</b> 5135 Timber Branch San Antonio TX 78250	<b>7 Amount of contribution (\$)</b> 100.00	<b>8 In-kind contribution description (if applicable)</b>
<b>9 Principal occupation (Optional)</b>		<b>10 Employer (Optional)</b>	
<b>Date</b> 01/31/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) GSABA-SABPAC  <b>Contributor address; City; State; Zip Code</b> 8925 IH-10 West San Antonio TX 78230	<b>Amount of contribution (\$)</b> 1000.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	
<b>Date</b> 03/08/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mrs. Virginia Gill  <b>Contributor address; City; State; Zip Code</b> 7903 Quirt Drive San Antonio TX 78227	<b>Amount of contribution (\$)</b> 50.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	
<b>Date</b> 03/08/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Ms. Lucy Hall  <b>Contributor address; City; State; Zip Code</b> 6503 Buena Vista San Antonio TX 78237	<b>Amount of contribution (\$)</b> 100.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	
<b>Date</b> 01/31/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. John and Cynthia Harwell  <b>Contributor address; City; State; Zip Code</b> P.O. Box 17065 San Antonio TX 78217	<b>Amount of contribution (\$)</b> 500.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

SCHEDULE A 1  
FOR FORMS C/OH & SPAC

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR - 3 PM 1:43

Total pages in this report: 4/14

<b>2 FILER NAME</b> Mr. Enrique Barrera		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00000000	
<b>4 Date</b> 01/31/0003	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. Tim Kerley  <b>6 Contributor address; City; State; Zip Code</b> P.O. Box 17187 San Antonio TX 78217	<b>7 Amount of contribution (\$)</b> 500.00	<b>8 In-kind contribution description (if applicable)</b>
<b>9 Principal occupation (Optional)</b>		<b>10 Employer (Optional)</b>	
<b>Date</b> 02/01/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. & Mrs. Richard Kleinjan  <b>Contributor address; City; State; Zip Code</b> 7919 Westshire San Antonio TX 78227	<b>Amount of contribution (\$)</b> 100.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	
<b>Date</b> 02/01/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. & Mrs. Keith Kolars  <b>Contributor address; City; State; Zip Code</b> 8702 Timber Point San Antonio TX 78250	<b>Amount of contribution (\$)</b> 200.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	
<b>Date</b> 03/08/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. Joe Lutostanski  <b>Contributor address; City; State; Zip Code</b> 739 Inspiration San Antonio TX 78228	<b>Amount of contribution (\$)</b> 20.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	
<b>Date</b> 02/28/0003	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Mr. Raul Perez  <b>Contributor address; City; State; Zip Code</b> 239 Pletz Drive San Antonio TX 78226	<b>Amount of contribution (\$)</b> 200.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation (Optional)</b>		<b>Employer (Optional)</b>	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

SCHEDULE A 1  
(OR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR 13 P 11:13  
Total pages in this report:  
5/14

## 2 FILER NAME

Mr. Enrique Barrera

## 3 ACCOUNT # (Ethics Commission filers)

00000000

## 4 Date

03/12/0003

## 5 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Ms. Jennifer Shelley Rodriguez

Contributor address; City; State; Zip Code  
1101 Southern Drive

Buda TX 78610

## 7 Amount of contribution (\$)

250.00

## 8 In-kind contribution description (if applicable)

## 9 Principal occupation (Optional)

## 10 Employer (Optional)

## Date

02/03/0003

## Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Mr. Paul Von Beck Lutes

Contributor address; City; State; Zip Code  
10834 Deep Water Bay

San Antonio TX 78251

## Amount of contribution (\$)

500.00

## In-kind contribution description (if applicable)

## Principal occupation (Optional)

## Employer (Optional)

**POLITICAL EXPENDITURES**

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3

1st page report:  
6/14

**2 FILER NAME**

Mr. Enrique Barrera

**3 ACCOUNT #** (Ethics Commission filers)  
00000000

<b>4 Date</b> 01/16/0003	<b>5 Payee name</b> Altex Electronics	<b>7 Amount (\$)</b> 1025.83
	<b>6 Payee address; City; State; Zip Code</b> 14215 San Pedro San Antonio TX 78232	

<b>8 Purpose of expenditure (See instructions regarding type of information required.)</b> Computer for Campaign	<b>9 Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b> 03/08/0003	<b>Payee name</b> Mr. Robert Bernal	<b>Amount (\$)</b> 100.00
	<b>Payee address; City; State; Zip Code</b> San Antonio TX 78228	

<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Music for Headquarters Opening	<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b> 02/01/0003	<b>Payee name</b> Mr. Juan Cabrera	<b>Amount (\$)</b> 200.00
	<b>Payee address; City; State; Zip Code</b> 1225 West Malone San Antonio TX 78225	

<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Music at Announcement	<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
---	---

<b>Date</b> 02/18/0003	<b>Payee name</b> City of San Antonio	<b>Amount (\$)</b> 100.00
	<b>Payee address; City; State; Zip Code</b> P.O. Box 839966 San Antonio TX 78283	

<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Filing Fee	<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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**POLITICAL EXPENDITURES**

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.

2003 APR - 31  
Total pages: 3  
Report: 7/14

**2 FILER NAME**

Mr. Enrique Barrera

**3 ACCOUNT #** (Ethics Commission filers)

00000000

**4 Date**

01/22/0003

**5 Payee name**

Crumrine

**7 Amount**(\$)  
320.39**6 Payee address; City; State; Zip Code**

2030 East Houston

San Antonio TX 78202

**8 Purpose of expenditure** (See instructions regarding type of information required.)

Announcement Invitations

**9 Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

02/26/0003

**Payee name**

Crumrine

**Amount**(\$)  
336.57**Payee address; City; State; Zip Code**

2030 East Houston

San Antonio TX 78202

**Purpose of expenditure** (See instructions regarding type of information required.)

Invitations

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

03/08/0003

**Payee name**

Crumrine

**Amount**(\$)  
1102.48**Payee address; City; State; Zip Code**

2030 East Houston

San Antonio TX 78202

**Purpose of expenditure** (See instructions regarding type of information required.)

Push Cards

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

02/13/0003

**Payee name**

Mr. Mike DeNuccio

**Amount**(\$)  
86.23**Payee address; City; State; Zip Code**

255 East Kings Highway

San Antonio TX 78212

**Purpose of expenditure** (See instructions regarding type of information required.)

Reimbursement for Office Supplies

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**POLITICAL EXPENDITURES**

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3

Total pages report:  
8/14

<b>2 FILER NAME</b> Mr. Enrique Barrera		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00000000	
<b>4 Date</b> 02/17/0003	<b>5 Payee name</b> Mr. Mike DeNuccio		<b>7 Amount (\$)</b> 618.40
<b>6 Payee address; City; State; Zip Code</b> 255 East Kings Highway San Antonio TX 78212			
<b>8 Purpose of expenditure</b> (See instructions regarding type of information required.) Campaign Reimbursement		<b>9 Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held	
<b>Date</b> 03/08/0003	<b>Payee name</b> Mr. Mike DeNuccio		<b>Amount (\$)</b> 41.35
<b>Payee address; City; State; Zip Code</b> 255 East Kings Highway San Antonio TX 78212			
<b>Purpose of expenditure</b> (See instructions regarding type of information required.) Reimbursement for Campaign Expenses		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held	
<b>Date</b> 03/14/0003	<b>Payee name</b> Mr. Mike DeNuccio		<b>Amount (\$)</b> 64.41
<b>Payee address; City; State; Zip Code</b> 255 East Kings Highway San Antonio TX 78212			
<b>Purpose of expenditure</b> (See instructions regarding type of information required.) T-posts & Keys		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held	
<b>Date</b> 02/13/0003	<b>Payee name</b> Edgewood Community Education		<b>Amount (\$)</b> 105.00
<b>Payee address; City; State; Zip Code</b> 563 SW 40th Street San Antonio TX 78227			
<b>Purpose of expenditure</b> (See instructions regarding type of information required.) Advertisement		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held	



**POLITICAL EXPENDITURES**

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CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3 P 1:43

Total pages report:  
14/14

<b>2 FILER NAME</b> Mr. Enrique Barrera		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00000000	
<b>4 Date</b> 01/30/0003	<b>5 Payee name</b> HEB		<b>7 Amount (\$)</b> 34.05
	<b>6 Payee address; City; State; Zip Code</b> 721 Castroville Road San Antonio TX 78207		
<b>8 Purpose of expenditure (See instructions regarding type of information required.)</b> Food for Meeting		<b>9 Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held	
<b>Date</b> 01/30/0003	<b>Payee name</b> HEB		<b>Amount (\$)</b> 66.22
	<b>Payee address; City; State; Zip Code</b> 721 Castroville Road San Antonio TX 78207		
<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Food & Beverages for Meeting		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held	
<b>Date</b> 03/08/0003	<b>Payee name</b> HEB		<b>Amount (\$)</b> 360.71
	<b>Payee address; City; State; Zip Code</b> 721 Castroville Road San Antonio TX 78207		
<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Food and Beverages for Headquarter Opening		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held	
<b>Date</b> 03/22/0003	<b>Payee name</b> Handy Andy		<b>Amount (\$)</b> 27.29
	<b>Payee address; City; State; Zip Code</b> 7141 Highway 90 San Antonio TX 78227		
<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Water and Snacks for Campaign Workers		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held	

**POLITICAL EXPENDITURES****SCHEDULE F**

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CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:

2003 APR -3 P 1:43

2 FILER NAME

Mr. Enrique Barrera

3 ACCOUNT # (Ethics Commission filers)

00000000

4 Date

02/12/0003

5 Payee name

Holy Family Senior Center Entertainment Community

7 Amount

(\$)  
100.00

6 Payee address; City; State; Zip Code

153 Florencia

San Antonio TX 78228

8 Purpose of expenditure (See instructions regarding type of information required.)

Valentine Dance

9 Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

03/08/0003

Payee name

Ideas Unlimited

Amount

(\$)  
1356.59

Payee address; City; State; Zip Code

2126 Sacramento

San Antonio TX 78221

Purpose of expenditure (See instructions regarding type of information required.)

T-Shirts

Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

01/05/0003

Payee name

Ithaca Investments Ltd.

Amount

(\$)  
250.00

Payee address; City; State; Zip Code

100 NE Loop 410

San Antonio TX 78237

Purpose of expenditure (See instructions regarding type of information required.)

Jan. Rent

Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

02/13/0003

Payee name

Ithaca Investments Ltd.

Amount

(\$)  
250.00

Payee address; City; State; Zip Code

100 NE Loop 410

San Antonio TX 78237

Purpose of expenditure (See instructions regarding type of information required.)

Feb. Rent

Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

**POLITICAL EXPENDITURES**

RECEIVED  
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CITY CLERK

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3 P 1:44

Total pages report:

**2 FILER NAME**

Mr. Enrique Barrera

**3 ACCOUNT #** (Ethics Commission filers)

00000000

**4 Date**

03/14/0003

**5 Payee name**

Ithaca Investments Ltd.

**7 Amount**(\$)  
500.00**6 Payee address; City; State; Zip Code**

100 NE Loop 410

San Antonio TX 78237

**8 Purpose of expenditure** (See instructions regarding type of information required.)

March &amp; April Rent

**9 Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

02/13/0003

**Payee name**

Meadowcliff Community Center

**Amount**(\$)  
50.00**Payee address; City; State; Zip Code**

1240 Pinn Road

San Antonio TX 78227

**Purpose of expenditure** (See instructions regarding type of information required.)

Black History Month Supplies

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

01/26/0003

**Payee name**

Northwest Democrats

**Amount**(\$)  
250.00**Payee address; City; State; Zip Code**

6545 Village Park

San Antonio TX 78250

**Purpose of expenditure** (See instructions regarding type of information required.)

Contribution

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

03/15/0003

**Payee name**

Northwest Democrats

**Amount**(\$)  
15.00**Payee address; City; State; Zip Code**

6545 Village Park

San Antonio TX 78250

**Purpose of expenditure** (See instructions regarding type of information required.)

Candidate Forum Breakfast

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**POLITICAL EXPENDITURES**

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3 P1 1:44  
Total pages report:  
12/14

**2 FILER NAME**

Mr. Enrique Barrera

**3 ACCOUNT #** (Ethics Commission filers)

00000000

**4 Date**

01/05/0003

**5 Payee name**

Politico

**7 Amount**(\$)  
3500.00**6 Payee address; City; State; Zip Code**

604 East Locust

San Antonio TX 78212

**8 Purpose of expenditure** (See instructions regarding type of information required.)

Campaign Data &amp; Consulting Services

**9 Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

02/13/0003

**Payee name**

Politico

**Amount**(\$)  
275.00**Payee address; City; State; Zip Code**

604 East Locust

San Antonio TX 78212

**Purpose of expenditure** (See instructions regarding type of information required.)

Invitation Announcement

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

03/03/0003

**Payee name**

Politico

**Amount**(\$)  
2000.00**Payee address; City; State; Zip Code**

604 East Locust

San Antonio TX 78212

**Purpose of expenditure** (See instructions regarding type of information required.)

Consulting Services

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

01/22/0003

**Payee name**

Postmaster

**Amount**(\$)  
132.94**Payee address; City; State; Zip Code**

5555 Saint Fernando Street

San Antonio TX 78205

**Purpose of expenditure** (See instructions regarding type of information required.)

Postage for Invitations

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**POLITICAL EXPENDITURES**

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3 P 1:44

Total pages report:  
13/14**2 FILER NAME**

Mr. Enrique Barrera

**3 ACCOUNT #** (Ethics Commission filers)  
00000000

<b>4 Date</b> 02/24/0003	<b>5 Payee name</b> Postmaster  <b>6 Payee address; City; State; Zip Code</b> 5555 Saint Fernando Street San Antonio TX 78205	<b>7 Amount (\$)</b> 23.00
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<b>8 Purpose of expenditure (See instructions regarding type of information required.)</b> Postage for invitations	<b>9 Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b> 02/26/0003	<b>Payee name</b> Postmaster  <b>Payee address; City; State; Zip Code</b> 5555 Saint Fernando Street San Antonio TX 78205	<b>Amount (\$)</b> 161.00
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<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Mailing invitations	<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b> 01/15/0003	<b>Payee name</b> Principal Impact  <b>Payee address; City; State; Zip Code</b> P.O. Box 761555 San Antonio TX 78245	<b>Amount (\$)</b> 960.07
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<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Fundraising Services	<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b> 03/12/0003	<b>Payee name</b> SBC  <b>Payee address; City; State; Zip Code</b> P.O. Box 4844 Houston TX 77079	<b>Amount (\$)</b> 440.31
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<b>Purpose of expenditure (See instructions regarding type of information required.)</b> HQ Telephone Services	<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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**POLITICAL EXPENDITURES**RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 APR -3 P

1 Total pages report:  
144**2 FILER NAME**

Mr. Enrique Barrera

**3 ACCOUNT #** (Ethics Commission filers)  
00000000**4 Date**

03/07/0003

**5 Payee name**

Target

**7**

Amount

(\$)

125.09

**6 Payee address; City; State; Zip Code**

8215 Marbach

San Antonio TX 78226

**8 Purpose of expenditure** (See instructions regarding type of information required.)

Campaign Supplies

**9 Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held